

CERTIFICATE OF MAILING

I hereby certify that this document is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450 on the date set forth below.



Joni Bosch
(signature)

Dec. 5, 2003
(date of signature and deposit)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
Trent S. Herman)	
)	Group Art Unit 1722
Serial No. 10/023,966)	
)	
Filed: December 18, 2001)	Examiner Emmanuel S. Luk
)	
For: EXTRACTION DEVICE FOR)	
REMOVING A STUCK CAST)	
PART FROM A STATIONARY)	Attorney Docket 1-23101
MOLD OF A CASTING)	
APPARATUS)	

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

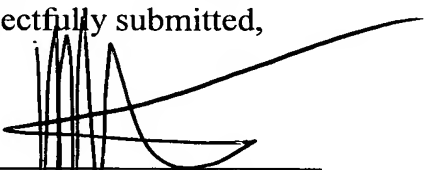
AMENDMENT

Honorable Sir:

In response to the Official Action dated September 26, 2003 (Paper No. 2), please amend the above-identified application as indicated on the following pages.

Respectfully submitted,

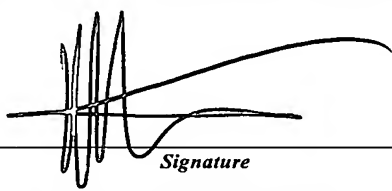
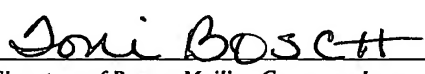
By


Douglas V. Pavelko
Reg. No. 36,888

MacMillan, Sobanski & Todd, LLC
One Maritime Plaza, 4th Floor
720 Water Street
Toledo, Ohio 43604
(419) 255-5900

GP1722

Image

AMENDMENT TRANSMITTAL LETTER (Large Entity) Applicant(s): Trent S. Herman			Docket No. 1-23101		
Serial No. 10/023,966	Filing Date December 18, 2001	Examiner Emmanuel S. Luk		Group Art Unit 1722	
Invention: EXTRACTION DEVICE FOR REMOVING A STUCK CAST PART FROM A STATIONARY MOLD OF A CASTING APPARATUS					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	20 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
 <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 08-1393 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: December 5, 2003		
Douglas V. Pavelko, Reg. No. 36,888 MacMillan, Sobanski & Todd LLC One Maritime Plaza, Fourth Floor 720 Water Street Toledo, OH 43604 Telephone: 419-255-5900 Facsimile: 419-255-9639 Email: pavelko@mstfirm.com			<div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and fee is being deposited on Dec. 5, 2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><p style="text-align:center"> Signature of Person Mailing Correspondence</p><p style="text-align:center">T ni Bosch Typed or Printed Name of Person Mailing Correspondence</p></div>		
cc:					